FILED Apr 12, 2005 8:00 am Secretary of State 2005 FOR PROFIT CORPORATION ANNUAL REPORT

1. Entity Name GREENIE HANGARS, INC.					04-12-2005	90148 010 ****	150.00	
Principal Plac	e of Business	Mailing Address	· · · · · · · · · · · · · · · · · · ·			Irr		
•	S RD., SUITE 245	1900 GLADES RD., SUI BOCA RATON, FL 3343				_		
					18 18118 CEII BBIR 18811 6 8	 		11)
2. Principal Place of Business		. Mailing Address						
2255 Glades Rd.		2255 Glad						
Suite, Apt. #, etc.		Suite, Apt. #, etc.	03022005	Chg-P	CR2E034 (10/	03)		
Suite 321A City & State		Suite 321A City & State		4. FEI Numb	ner .		Applied	For
Boca Raton, F1		Boca Raton, F1		65-101			Not App	
Zip	Country	Zip	Country	F. Cortificate	e of Status Desired	\$8.75	Additiona	1
33431	U.S.A.	33431	U.S.A.			Fee Hec	uired	
	6. Name and Address of Current Reg	istered Agent		7. Name and	d Address of New F	tegistered Agent		
GREENBERG, MARTIN F				Name BRESLOW, RICHARD H.				
1900 GLADES RD., SUITE 245 BOCA RATON, FL 33431				Street Address (P.O. Box Number is Not Acceptable) 2255 Glades Rd., Suite 321A				
						_ _		
				Boca Rato	n		Code 3431	
8. The above named entry submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept								ccept
the obligations of registered agents.								
SIGNATURE JULY M. Touch RICHARD H. BRESLOW -3-7-05								
	Signature, typed or printed name of registered agent and to	te if applicable. (NOTE	: Registered Agent signatur	re required when reinstating}		DATE		
FILE NOW!!! FEE IS \$150,00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financ Trust Fund Contribution.				\$5.00 May Be Added to Fees				
10.	OFFICERS AND DIR	ECTORS	11.	ADDITIONS	CHANGES TO OFF	ICERS AND DIRECT	FORS IN 1	1
TITLE	PD	☐ Delete	TITLE	PD	DO W.D.D.	Char	nge 🔲 /	Addition
NAME :	GREENBERG, MARTIN F		NAME		RG, MART			
STREET ADDRESS CITY-ST-ZIP	1900 GLADES RD., SUITE 245 BOCA RATON, FL 33431		STREET ADDRESS CITY-ST-ZIP			, Suite 3	321A	
	BOCA RATON, FE 33431			Boca Ra	ton, Fl 3			
TITLE NAME	<u> </u>	☐ Delete	TITLE NAME			☐ Char	ige 🔲 /	Addition
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NAME			NAME					
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TITLE		☐ Delete	TITLE			☐ Char	nge 🔲 /	Addition
name Street address			NAME STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP					
TITLE		☐ Delete	TITLE			☐ Char	one C1.	Addition
NAME		□ Delets	NAME			Li Chai	rys ∐ /	nouldon
STREET ADDRESS			STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP					
12. I hereby o	certify that the information supplied with this	filing does not qualify for	the exemption state	ed in Section 119.07(3))(i), Florida Statutes.	I further certify that t	the informa	ation
indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.								

MARTIN F. GREENBERG, PRESIDENT

SIGNATURE: _

3-7-05

561-347-8585

Daytime Phone #